

RECEIVED

FEC  
FORM 3XREPORT OF RECEIPTS  
AND DISBURSEMENTS  
For Other Than An Authorized Committee2010 OCT 22 AM 7:44  
FEC MAIL CENTER

Office Use Only

1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

12FE4M5

KENTUCKY FORWARD PAC

ADDRESS (number and street)

P.O. Box 257

Check if different  
than previously  
reported. (ACC)

Frankfort

Ky

40602

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C00417717

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)4. TYPE OF REPORT  
(Choose One)

(a) Quarterly Reports:

April 15  
Quarterly Report (Q1)July 15  
Quarterly Report (Q2)October 15  
Quarterly Report (Q3)January 31  
Year-End Report (YE)July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)Termination Report  
(TER)(b) Monthly  
Report  
Due On:

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)  
(Non-Election  
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)  
(Non-Election  
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day  
PRE-Election  
Report for the:

Primary (12P)



General (12G)



Runoff (12R)

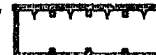


Convention (12C)



Special (12S)

Election on

in the  
State of(d) 30-Day  
POST-Election  
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

in the  
State of

5. Covering Period

07

01

2010

through

09

30

2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

R. WAYNE STRATTON

Signature of Treasurer

Date

10

15

2010

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
OnlyFEC FORM 3X  
(Rev. 02/2003)

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

*Kentucky Forward PAC*

Report Covering the Period:

From:

MM ' DD ' YYYY  
07 ' 01 ' 2010

To:

MM ' DD ' YYYY  
09 ' 30 ' 2010

COLUMN A  
This Period

COLUMN B  
Calendar Year-to-Date

6. (a) Cash on Hand

January 1,

MM ' DD ' YYYY  
2010

MM ' DD ' YYYY  
179,165.3

(b) Cash on Hand at

Beginning of Reporting Period.....

MM ' DD ' YYYY  
219,114.9

(c) Total Receipts (from Line 19) .....

MM ' DD ' YYYY  
16,000.00

MM ' DD ' YYYY  
26,000.00

(d) Subtotal (add Lines 6(b) and  
6(c) for Column A and Lines

6(a) and 6(c) for Column B).....

MM ' DD ' YYYY  
379,114.9

MM ' DD ' YYYY  
43,916.53

7. Total Disbursements (from Line 31).....

MM ' DD ' YYYY  
117,675.0

MM ' DD ' YYYY  
17,772.54

8. Cash on Hand at Close of

Reporting Period

(subtract Line 7 from Line 6(d)).....

MM ' DD ' YYYY  
26,143.99

MM ' DD ' YYYY  
26,143.99

9. Debts and Obligations Owed TO

the Committee (Itemize all on

Schedule C and/or Schedule D) .....

MM ' DD ' YYYY

10. Debts and Obligations Owed BY

the Committee (Itemize all on

Schedule C and/or Schedule D) .....

MM ' DD ' YYYY



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

Kentucky Forward PAC

Report Covering the Period:

From:

07 ' 01 ' 2010

To:

09 ' 30 ' 2010

**I. Receipts**

**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other  
Than Political Committees

(i) Itemized (use Schedule A).....

(ii) Unitemized.....

(iii) TOTAL (add  
Lines 11(a)(i) and (ii))..... ▶

(b) Political Party Committees.....

(c) Other Political Committees  
(such as PACs).....

(d) Total Contributions (add Lines  
11(a)(iii), (b), and (c)) (Carry  
Totals to Line 33, page 5)..... ▶

12. Transfers From Affiliated/Other  
Party Committees.....

13. All Loans Received.....

14. Loan Repayments Received.....

15. Offsets To Operating Expenditures  
(Refunds, Rebates, etc.)  
(Carry Totals to Line 37, page 5).....

16. Refunds of Contributions Made  
to Federal Candidates and Other  
Political Committees.....

17. Other Federal Receipts  
(Dividends, Interest, etc.).....

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account  
(from Schedule H3).....

(b) Levin Funds (from Schedule H5).....

(c) Total Transfers (add 18(a) and 18(b))..

19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

20. Total Federal Receipts  
(subtract Line 18(c) from Line 19)..... ▶

1600000

1600000

1600000

26000000

26000000

26000000

10030470689



# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

## **III. Net Contributions/Operating Ex-** **penditures**

### **COLUMN A** **Total This Period**

### **COLUMN B** **Calendar Year-to-Date**

- 33. Total Contributions (other than loans)  
(from Line 11(d), page 3) .....
- 34. Total Contribution Refunds  
(from Line 28(d)) .....
- 35. Net Contributions (other than loans)  
(subtract Line 34 from Line 33) .....
- 36. Total Federal Operating Expenditures  
(add Line 21(a)(i) and Line 21(b)) .....
- 37. Offsets to Operating Expenditures  
(from Line 15, page 3) .....
- 38. Net Operating Expenditures  
(subtract Line 37 from Line 36) .....

1600000
000
1600000

2600000
000
2600000

10030470691

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 6 OF 11

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)

*Kentucky Forward PAC*

Full Name (Last, First, Middle Initial)

A. *EASTERN BAND of Cherokee Indians*

Mailing Address

*P.O. Box 455*

City

*Cherokee*

State

*NC*

Zip Code

*38719*

FEC ID number of contributing  
federal political committee.

*C*

Name of Employer

Occupation

Receipt For:

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

*10000.00*

Date of Receipt

*08 / 25 / 2010*

Amount of Each Receipt this Period

*10000.00*

Full Name (Last, First, Middle Initial)

B. *San Manuel BAND of Mission Indians*

Mailing Address

*26569 Community Center Dr.*

City

*Highland*

State

*CA*

Zip Code

*92346*

FEC ID number of contributing  
federal political committee.

*C 50000.00*

Name of Employer

Occupation

Receipt For:

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

*50000.00*

Date of Receipt

*08 / 25 / 2010*

Amount of Each Receipt this Period

*50000.00*

Full Name (Last, First, Middle Initial)

C. *Yocha Dehe Wintun Nation*

Mailing Address

*18960 County Road 75A*

City

*Brooks*

State

*CA*

Zip Code

*95606*

FEC ID number of contributing  
federal political committee.

*C*

Name of Employer

Occupation

Receipt For:

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

*50000.00*

Date of Receipt

*08 / 25 / 2010*

Amount of Each Receipt this Period

*50000.00*

SUBTOTAL of Receipts This Page (optional).....

*110000.00*

TOTAL This Period (last page this line number only).....

*110000.00*

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE **7** OF **1**

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Kentucky Forward PAC**

Full Name (Last, First, Middle Initial)

A. **Brown Forman Corp. Non-Partisan**  
**Committee for Responsible**  
**Government**

Mailing Address

**P.O. Box 1080**

City

**Louisville**

State

**Ky**

Zip Code

**40201**

FEC ID number of contributing  
federal political committee.

**C00059733**

Name of Employer

Occupation

Receipt For:

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**5000.00**

Date of Receipt

**09 / 10 / 2010**

Amount of Each Receipt this Period

**5000.00**

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶

**5000.00**

TOTAL This Period (last page this line number only).....▶

**16000.00**

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 8 OF 11

☐ 21b ☒ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Kentucky Forward PAC

Full Name (Last, First, Middle Initial)

A. Kentucky Forward State PAC

Mailing Address

P.O. Box 257

City

Frankfort

State

Ky

Zip Code

40602

Purpose of Disbursement

Transfer to Affiliated Party

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

08 / 13 / 2010

Amount of Each Disbursement this Period

100000

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

100000



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 9 OF 11

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

*Kentucky FORWARD PAC*

Full Name (Last, First, Middle Initial)

A. *Boyd for Congress*

Mailing Address

*P.O. Box 15703*

City

*Tallahassee*

State

*FL*

Zip Code

*32317*

Purpose of Disbursement

*Political Contribution*

Candidate Name

*F. Allen Boyd, Jr.*

Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For:

☒ Primary ☐ General  
☐ Other (specify) ▼

State: *FL*

District: *02*

Date of Disbursement

*08 / 23 / 2010*

Amount of Each Disbursement this Period

*2400.00*

B. *Boyd for Congress*

Mailing Address

*P.O. Box 15703*

City

*Tallahassee*

State

*FL*

Zip Code

*32317*

Purpose of Disbursement

*Political Contribution*

Candidate Name

*F. Allen Boyd, Jr.*

Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☒ General  
☐ Other (specify) ▼

State: *FL*

District: *02*

Date of Disbursement

*08 / 23 / 2010*

Amount of Each Disbursement this Period

*2400.00*

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

*4800.00*

10030470695

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 10 OF 11

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Kentucky Forward PAC

Full Name (Last, First, Middle Initial)

A. Kentucky Young Democrats

Mailing Address

P.O. Box 694

City

Frankfort

State

Ky

Zip Code

40602

Purpose of Disbursement

Sponsor Table/Advertising

Candidate Name

Category/  
Type

Date of Disbursement

07 / 15 / 2010

Amount of Each Disbursement this Period

500.00

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. Jones, Nale & Mattingly

Mailing Address

642 South 4th St. #300

City

Louisville

State

Ky

Zip Code

40202

Purpose of Disbursement

Accounting Assistance

Candidate Name

Category/  
Type

Date of Disbursement

07 / 19 / 2010

Amount of Each Disbursement this Period

385.00

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C. Jones, Nale & Mattingly

Mailing Address

642 South 4th St. #300

City

Louisville

State

Ky

Zip Code

40202

Purpose of Disbursement

Accounting Assistance

Candidate Name

Category/  
Type

Date of Disbursement

08 / 24 / 2010

Amount of Each Disbursement this Period

82.50

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

SUBTOTAL of Disbursements This Page (optional).....▶

967.50

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 11 OF 11

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☒ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

*Kentucky Forward PAC*

Full Name (Last, First, Middle Initial)

A. *Kentucky Democratic Party*

Mailing Address

*P.O. Box 694*

City

*Frankfort*

State

*Ky*

Zip Code

*40602*

Purpose of Disbursement

*Contribution to State Party*

Candidate Name

Category/  
Type

Date of Disbursement

*09 / 29 / 2010*

Amount of Each Disbursement this Period

*5000.00*

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

*MM / DD / YYYY*

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

*MM / DD / YYYY*

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

*MM / DD / YYYY*

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

*MM / DD / YYYY*

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶


*5000.00*

*5967.50*

10030470697

Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS**  
The FEC added this page to the end of this filing to indicate how it was received.

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<input checked="" type="checkbox"/> USPS First Class Mail	Postmarked <b>10/15/10</b>
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
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Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery <input type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

  
PREPARER  
(3/2005)

**10/22/10**  
DATE PREPARED

10030470698